## PART B - FEE(S) TRANSMITTAL

SEP 2 1 7005

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as including a superior of the current correspondence address as including a superior of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address)

01933

06/29/2005

FRISHAUF, HOLTZ, GOODMAN & CHICK, PC 220 5TH AVE FL 16 NEW YORK, NY 10001-7708

09/21/2005 CNGUYEN1 00000168 10809632

01 FC:1501 02 FC:1504 03 FC:8001

1400.00 OP 300.00 OP 3.00 OP Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Laraine Dobies	(Depositor's name)
Larane Doluis	(Signature)
VIA FAX - September 2	1. 2005 (Date)
~~~	

FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. 04194/HG 7480 10/809,632 03/24/2004 Saburou Hiraoka

TITLE OF INVENTION: DEVELOPMENT PROCESS ON A PRESS OF PLANOGRAPHIC PRINTING PLATE MATERIAL AND PRINTING PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	09/29/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
EVANISKO, LESLIE J		2854		101-463100			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence</li> </ol>			2. For printing on the patent front page, list FRISHAUF, HOLTZ, GOODMAN  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  & CHICK, P.C.				
Address form PTO/SB/122) attached.		Correspondence	(2) the name of a single firm (having as a member a 2				
XX "Fee Address" indication (or "Fee Address" Indication form registered attorney or agent) and the names of up to							
3. ASSIGNEE NAME AN	D RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	T (print or type)			
PLEASE NOTE: Unle	ss an assignce is identified be in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Ta substitute	pear on the patent. If an assign for filing an assignment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIG	NEE	<b>(</b> E	B) RESIDEN	CE: (CITY and STATE OR CO	UNTRY)		
	TA MEDICAL & GRA			Tokyo, Ja	_	roup entity Government	
<del></del>				·	orporation or owner proving		
4a. The following fee(s) at XXX Issue Fee	e enclosed.	4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.					
	E						
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 1  Deposit Account Number (enclose an extra copy of this form).							
5. Change in Entity State	is (from status indicated all over						
a. Applicant claims	SMALL ENTITY status. Sec	37 CFR 1.27.		cant is no longer claiming SMA			
The Director of the USPTONOTE: The Issue Fee and interest as shown by the re	O is requested to app) the Iss Publication Fee (if required), cords of the United States Val	us Fee and Publica will not be accepte ent and Trademark	tion Fee (if a d from anyon Office,	ny) or to re-apply any previous ne other than the applicant; a reg	ly paid issue fee to the applications of attorney or agent; or	cation identified above. the assignee or other party in	
Authorized Signature				_ Date <u>S</u>	eptember 21,		
Typed or printed name		J. Chick			1 No. 26,853		
li Castidanti	alitar in maximum ad har 75 II C C	' 177 and 37 CHR	I IA This co	to obtain or retain a benefit by ollection is estimated to take 12 upon the individual case. Any o	minines in complete, includ	me cameime, dicoming, on	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE